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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) DLT-001DIV1		
Application Number	10/649,397-Conf. #6100	Filed August 27, 2003		
For	COMPUTER IMPLEMENTED AUTOMATED CREDIT APPLICATION ANALYSIS AND DECISION ROUTING SYSTEM			
Art Unit	3696	Examiner D. S. Felten		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	Fee \$130	Small Entity Fee \$65	\$ _____
<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	Fee \$490	Small Entity Fee \$245	\$ 490.00
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	Fee \$1110	Small Entity Fee \$555	\$ _____
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	Fee \$1730	Small Entity Fee \$865	\$ _____
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	Fee \$2350	Small Entity Fee \$1175	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>07-1700</u> .				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
I am the	<input type="checkbox"/>	applicant/inventor.		
	<input type="checkbox"/>	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).		
	<input checked="" type="checkbox"/>	attorney or agent of record. Registration Number <u>50,389</u>		
	<input type="checkbox"/>	attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34		
<u>/Robert S. Blasi/</u>		July 1, 2009		
Signature		Date		
<u>Robert S. Blasi</u>		(617) 570-1408		
Typed or printed name		Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
<input type="checkbox"/>	Total of _____ forms are submitted.			